Application or Docket Number

## PATENT APPLICATION FEE DETERMINATION RECORD

Effective October 1, 2000

| CLAIMS AS FILED - PART I<br>(Column 1)                   |   |   |                 |                    | (Column 2)                      |                  |            | SMALL ENTITY TYPE   |                        | OR | OTHER THAN OR SMALL ENTITY              |                        |
|--|---|---|-----------------|--------------------|---------------------------------|------------------|------------|---------------------|------------------------|----|---|------------------------|
| TOTAL CLAIMS   |   |   |                 |                    |                                 |                  |            | RATE                | FEE                    |    | RATE                                    | FEE                    |
| FOR  |   |   | NUMBER FILED    |                    | NUMBER EXTRA                    |                  | Ī          | BASIC FEE           | 355.00                 | OR | BASIC FEE                               | 710.00                 |
| TOTAL CHARGEABLE CLAIMS                                  |   |   | minus 20=       |                    |                                 |                  |            | X\$ 9=              |                        | OR | X\$18=                                  |                        |
| INDEPENDENT CLAIMS                                       |   |   | minus 3 =       |                    | •                               |                  | I          | X40=                |                        | OR | X80=                                    |                        |
| MULTIPLE DEPENDENT CLAIM PRESENT                         |   |   |                 |                    | <u>.</u>                        |                  | ľ          | +135=               |                        | OR | +270=                                   |                        |
| * If the difference in column 1 is less than zero, enter |   |   |                 |                    | r "0".in c                      | olumn 2          | L          | TOTAL               |                        | OR | TOTAL                                   |                        |
| CLAIMS AS AMENDED - PA                                   |   |   |                 |                    | TII                             |                  |            |                     | 1                      |    | OTHER                                   |                        |
|  | <b>4</b>  | (Column 1)                                | (Colum<br>HIGHE |                    |                                 |                  |            | SMALL E             |                        | OR | SMALL                                   |                        |
| AMENDMENT A  |   | CLAIMS<br>REMAINING<br>AFTER<br>AMENDMENT |                 | NUM<br>PREVI       | BER<br>OUSLY<br>FOR             | PRESENT<br>EXTRA |            | RATE                | ADDI-<br>TIONAL<br>FEE |    | RATE                                    | ADDI-<br>TIONAL<br>FEE |
|  | Total   | *   | Minus           | **                 |                                 | =                |            | X\$ 9=              |                        | OR | X\$18=                                  |                        |
|  | Independent   | *   | Minus           | ***                | T CL AINA                       | =                |            | X40=                |                        | OR | X80=                                    |                        |
|  | FIRST PRESE   | NTATION OF M                              | JUIPLE DEF      | ENDEN              | I CLAIM                         |                  |            | +135=               |                        | OR | +270=                                   |                        |
|  |   |   |                 |                    |                                 |                  | L          | TOTAL               |                        | OR | TOTAL                                   |                        |
| (Column 1) (Column 2) (Column 3)                         |   |   |                 |                    |                                 |                  |            | ADDIT. FEE          |                        |    | ADDIT. FEE                              |                        |
|  |   | (Column 1)<br>CLAIMS                      |                 |                    | HEST                            | (Column 3)       | Г          | 1                   | ADDI-                  |    |   | ADDI-                  |
| AMENDMENT B  | Land of the second  | REMAINING<br>AFTER<br>AMENDMENT           | i menini        | PREVI              | MBER<br>OUSLY<br>FOR            | PRESENT<br>EXTRA |            | RATE                | TIONAL<br>FEE          |    | RATE                                    | TIONAL<br>FEE          |
|  | Total   | •   | Minus           | **                 |                                 | =                |            | X\$ 9=              |                        | OR | X\$18=                                  |                        |
|  | Independent   | *   | Minus           | ***                | T CL AINA                       | =                |            | X40=                |                        | OR | X80=                                    |                        |
| <u> </u>   | FIRST PRESE   | NTATION OF M                              | ULTIPLE DE      | PENDEN             | I CLAIM                         |                  | 1          | +135=               |                        | OR | +270=                                   |                        |
|  |   |   |                 |                    |                                 |                  | Ł          | TOTAL<br>ADDIT. FEE |                        | OR | TOTAL<br>ADDIT. FEE                     |                        |
|  |   | (Column 1)                                |                 | (Colu              | ımn 2)                          | (Column 3)       | 10         | AUDII. FEE          |                        | -  | ,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,, |                        |
| AMENDMENT C  |   | CLAIMS<br>REMAINING<br>AFTER<br>AMENDMENT |                 | HIG<br>NUI<br>PREV | HEST<br>MBER<br>IOUSLY<br>D FOR | PRESENT<br>EXTRA |            | RATE                | ADDI-<br>TIONAL<br>FEE |    | RATE                                    | ADDI-<br>TIONAL<br>FEE |
|  | Total   | *   | Minus           | **                 |                                 | =                |            | X\$ 9=              |                        | OR | X\$18=                                  | <i>;</i>               |
|  | Independent   |   | Minus           | ***                | IT O                            | =                |            | X40=                |                        | OR | X80=                                    |                        |
| Ľ  | FIRST PRESENTATION OF MULTIPLE DEPENDEN   |   |                 |                    | II CLAIN                        |                  | <b>ا</b> د | +135=               |                        | OR | +270=                                   |                        |
|  | * If the entry in column 1 is less than the entry in column 2, write "0" in column 3.   |   |                 |                    |                                 |                  |            |                     |                        | 1  | TOTAL                                   |                        |
| ***  | ** If the entry in column 1 is less than the entry in column 2, write 0 in column 3.  ** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20."  ***If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3."  The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1. |   |                 |                    |                                 |                  |            |                     |                        |    |   |                        |